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PTO/SB/05 (2/98)

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>Only for new nonprovisional applications under 37 CFR 1.53(h)</small>		Attorney Docket No.	01827.0044.00US00	
		First Named Inventor or Application Identifier	Donald B. EIDSON	
		Title	SYSTEM FOR CARRIER PHASE TRACKING OF DIMENSIONAL CODED SYMBOLS	
		Express Mail Label No.	EL 711910077US	

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents</i>		<b>ADDRESS TO:</b> Commissioner for Patents Box Patent Application Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (Form PTO-1082) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 31] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R&amp;D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claims</li><li>- Abstract of the Disclosure</li></ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 9]</p> <p>4. Oath or Declaration [Total Pages ]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</p> <p>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p>		<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p>	
<b>ACCOMPANYING APPLICATION PARTS</b>			
<p>7. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>8. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>13. <input type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in Statement(s) prior application, Status still proper and desired</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p>			
<small>*NOTE FOR ITEMS 1 &amp; 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</small>			

15. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /

Prior Application Information: Examiner: Group/Art Unit:

16. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 22930 or ☒ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

NAME	Robert C. Laurenson HOWREY SIMON ARNOLD & WHITE, LLP				
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Name (Print/Type)	Robert C. Laurenson	Registration No. (Attorney/Agent)	34,206		
Signature	<i>Robert C. Laurenson</i>			Date	December 15, 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231.

**FORM PTO-1082**

**Express Mail No. EL 711910077US**

**HOWREY SIMON ARNOLD & WHITE, LLP**  
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**Box Patent Application**

**COMMISSIONER FOR PATENTS**  
**Washington, D.C. 20231**

Sir:

Transmitted herewith for filing is the patent application of **Donald B. EIDSON** for **System for Carrier Phase Tracking of Multi-Dimensional Coded Symbols**.

Also, enclosed are:

1. Utility Patent Application Transmittal
2. Utility Application
3. Drawings
4. Reply Postcard

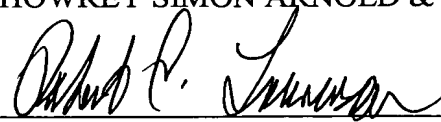
(Col. 1)		(Col. 2)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
FOR	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
<b>BASIC FEE</b>				<b>\$ 355.00</b>	OR		<b>\$ 710.00</b>
<b>TOTAL CLAIMS</b>	<b>60-20 =</b>	<b>40</b>	<b>x 9 =</b>	<b>0.00</b>	OR	<b>x 18 =</b>	<b>720.00</b>
<b>INDEP. CLAIMS</b>	<b>4-3 =</b>	<b>1</b>	<b>x 40 =</b>	<b>0.00</b>	OR	<b>x 80 =</b>	<b>80.00</b>
<input checked="" type="checkbox"/> <b>MULTIPLE DEPENDENT CLAIM PRESENTED</b>			<b>+ 135 =</b>	<b>0.00</b>	OR	<b>+ 270 =</b>	<b>270.00</b>
			<b>TOTAL</b>	<b>\$0.00</b>	OR	<b>TOTAL</b>	<b>\$1,780.00</b>

\*If the difference in Col. 1 is less than zero, enter "0" in Col. 2

**This application is being filed under 37 C.F.R. §1.53(b)(1) without declaration and filing fee.**

**HOWREY SIMON ARNOLD & WHITE, LLP**

Date: December 15, 2000

  
 Robert C. Laurenson, Reg. No. 34,206